

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10812731

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT										
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	1						51		1						
2	1						52		1						
3	1						53		1						
4	1						54		①						
5	1						55		①						
6	1						56		①						
7		6					57		①						
8		6					58		①						
9		6					59	1	①						
10		6					60		①						
11		①					61								
12		①					62								
13		①					63								
14		①					64								
15		①					65								
16		①					66								
17		①					67								
18		①					68								
19		①					69								
20		①					70								
21		①					71								
22		①					72								
23		①					73								
24		①					74								
25		①					75								
26		①					76								
27		①					77								
28		①					78								
29		①					79								
30		①					80								
31		①					81								
32		①					82								
33		①					83								
34		①					84								
35		①					85								
36		①					86								
37		①					87								
38		①					88								
39		①					89								
40		①					90								
41		1					91								
42		1					92								
43		1					93								
44		1					94								
45		1					95								
46		1					96								
47		①					97								
48		1					98								
49		1					99								
50		1					100								
TOTAL IND.	7		7		7		TOTAL IND.	7		7		7		7	
TOTAL DEP.	73		73		73		TOTAL DEP.	73		73		73		73	
TOTAL CLAIMS	80		80		80		TOTAL CLAIMS	80		80		80		80	